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#21 JDS  
PATENT  
57243-5007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:

Samuel W. Ho

Serial No.: Not yet assigned

Filed: Concurrently herewith

For: **QUALITY RATING TOOL  
FOR THE HEALTH CARE  
INDUSTRY**

Group Art Unit: Not yet assigned

Examiner: Not yet assigned

**CERTIFICATE OF MAILING**

I hereby certify that this document and the identified enclosures and fee are being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 and is addressed to: Assistant Commissioner for Patents, Box New Patent Applications, Washington, D.C. 20231 on February 28, 2002  
Express Mail Label No. EL891833785US by Kristin Freebairn

*Kristin Freebairn*

Assistant Commissioner for Patents  
Washington, D.C. 20231

**INFORMATION DISCLOSURE STATEMENT**  
**UNDER 37 CFR § 1.97(d)**

Sir:

In accordance with applicant's duty to disclose information which may be material to the examination of this application 37 CFR § 1.56, attached hereto is an Information Disclosure Statement with a copy of each reference set forth therein.

The submission of any document herewith, is not intended as an admission that such document constitutes prior art against the claims of the present application. Applicants do not waive any rights to take any action which would be appropriate to antedate or otherwise remove as a competent reference any document which is determined to be a prima facie prior art reference against the claims of the present application.

10/086557 5/2002  
02/28/02

U.S. Serial No. Not yet assigned

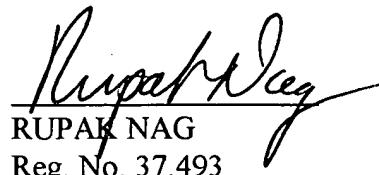
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Applicants respectfully request that the attached Information Disclosure Statement and references be considered by the Examiner and be made of record in the present application and that an initialed copy of Form PTO-1449 be returned in accordance with MPEP Sec. 609.

Respectfully submitted,

Feb. 28, 2002

Date

  
RUPAK NAG  
Reg. No. 37,493

JEFFER, MANGELS, BUTLER & MARMARO LLP  
Tenth Floor  
2121 Avenue of the Stars  
Los Angeles, CA 90067  
Tel: (310) 203-8080

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Sheet 1 of 1

FORM PTO 1449 (modified)  U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE  LIST OF REFERENCES CITED BY APPLICANT(S) (Use several sheets if necessary)  Date Submitted to PTO: February 28, 2002		ATTY DOCKET NO. 57243-5007	S SERIAL NO.				
		APPLICANT: Samuel W. Ho					
		FILING DATE:		GROUP ART UNITE:			
U.S. PATENT DOCUMENTS							
*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
		5,365,425	11/15/94	TORMA ET AL.			4/22/93
		5,519,607	5/21/96	TAWIL			7/6/93
		5,544,044	8/6/96	LEATHERMAN			8/2/91
		5,652,842	7/29/97	SIEGRIST, JR. ET AL.			3/1/94
		5,706,441	1/6/98	LOCKWOOD			6/7/95
		5,724,379	3/3/98	PERKINS ET AL.			12/21/94
		5,778,345	7/7/98	MCCARTNEY			1/16/96
		5,845,254	12/1/98	LOCKWOOD ET AL.			6/4/96
		5,924,073	7/13/99	TYULUMAN ET AL.			11/14/95
		6,014,629	1/11/00	DEBRUIN-ASHTON			1/13/98
		6,078,890	6/20/00	MANGIN ET AL.			6/1/98
		6,078,894	6/20/00	CLAWSON ET AL.			3/28/97
		6,151,581	11/21/00	KRAFTSON ET AL.			12/16/97
		6,338,042 B1	1/8/02	PAIZIS			1/10/98
FOREIGN PATENT DOCUMENTS							
		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION YES NO
OTHER DOCUMENT(S) (Including Author, Title, Date, Pertinent Pages, Etc.)							
				www.netmgmt.bluecrossca.com. Blue Cross of California, The Power of Blue Delivers Quality Health Care Choices			
				www.healthscope.org Health Scope. Quality Ratings, The Pacific Business Group on Health			
				www.opa.ca.gov/report_cars. California HMO Report Card, How does your HMO rate on quality and service			
				www.tufts-healthplan.com. TUFTS Health Plan, Physician Group Quality Profile. Tufts Associated Health Plans, Inc.			
				www.pacifiCare.com/california.com. PacifiCare Quality Index. PacifiCare Health Systems, Inc.			
EXAMINER				DATE CONSIDERED			

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.